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CONFIRMATION NO. 2545

SERIAL NUMBER 10/620,852	FILING OR 371(c) DATE 07/15/2003 RULE	CLASS 435	GROUP ART UNIT 1637	ATTORNEY DOCKET NO. 67234-015
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/396,237 07/15/2002 and is a CIP of 10/194,958 07/12/2002 which is a CIP of 10/177,727 06/20/2002 which claims benefit of 60/341,827 12/17/2001 and claims benefit of 60/336,958 12/03/2001 and claims benefit of 60/311,271 08/09/2001 and claims benefit of 60/305,118 07/12/2001 and is a CIP of 09/931,285 08/16/2001 PAT 6,913,884 which is a CIP of 09/915,231 07/24/2001 PAT 6,890,741 which claims benefit of 60/297,609 06/11/2001 and claims benefit of 60/234,143 09/21/2000 and is a CIP of 09/779,376 02/07/2001 which claims benefit of 60/234,732 09/22/2000 and claims benefit of 60/180,810 02/07/2000 and is a CIP of PCT/US01/04056 02/07/2001 which claims benefit of 60/234,732 09/22/2000 and claims benefit of 60/180,810 02/07/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\***

\*\* 10/16/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance
Verified and Acknowledged	Examiner's Signature Initials

STATE OR  
COUNTRY  
CA

SHEETS  
DRAWING  
28

TOTAL  
CLAIMS  
103

INDEPENDENT  
CLAIMS  
7

**ADDRESS**

41552

**TITLE**

Multiplex nucleic acid reactions

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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1613

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<input type="checkbox"/>	Other _____
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